

Best Available Copy

POSITION	INITIALS	ID No.	
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	NSS	842	11/7/01
RESPONSE FORMALITY REVIEW	wt-	571	12/12/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/16/02
2	11/14/02
3	5/1/03
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9	✓ ✓ ✓
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22	✓ ✓ ✓
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31	✓ ✓ ✓
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48	✓ ✓ ✓
49	✓ ✓ ✓
50	N N N

Claim	Date
Final Original	
51	9/16/02
52	11/14/02
53	5/1/03
54	✓ ✓ ✓
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59	✓ ✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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179C(110)  
 12-20-01

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 108